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## \*BIBDATASHEET\*

CONFIRMATION NO. 1585

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/661,773	<b>FILING OR 371(c) DATE</b> 09/14/2000 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> TEPH 102
<b>APPLICANTS</b> Simon F. Williams, Sherborn, MA; David P. Martin, Arlington, MA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/153,810 09/14/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 11/05/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 32
				<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 23579				
<b>TITLE</b> POLYHYDROXYALKANOATE COMPOSITIONS FOR SOFT TISSUE REPAIR, AUGMENTATION, AND VISCOSUPPLEMENTATION				
<b>FILING FEE RECEIVED</b> 596	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	